CLAIMS AS FILED - PART I (Column 1) (Column 2)					EKMTY	OR	OTHER	
TOTAL CLAIMS				RATE	FEE	۱ ۱	RATE	FEE
FOR .	NUMBER FO	ED NUM	ER EXTRA	BASIC	€E 395.00	OR	BASIC FEE	790.00
TOTAL CHARGEABLE CLAIM	s minus	: 20:		× 25		OR	x-50	
NDEPENDENT CLAIMS		ıs 3 =	•			1		
MULTIPLE DEPENDENT CLAI		332		x 10	<u> </u>	OR	x 200	<del></del>
				+1%	)	OR	+360	
If the difference in column	is less than zero	, enter "0" in	column 2	TOTA	L	OR	TOTAL	
CLAIMS A	S AMENDED -	PART II (Column 2)	(Column 3)	IAMS	T EKLILA	OR	OTHER SMALL E	
CLUMS HEMANIAN AFTER AMENOME	1	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- i IONAL FEEA		RATE	ADD! TIONA FEE
Total . 15	. Minus	- 20	= /	×2	5	OR	×50	
Independent .	Minus	<b></b> 3	=	×/0	0	OR	x200	
FIRST PRESENTATION OF	MULTIPLE DEPE	NDENT CLAIN	4 1	110	1	OR	42/A	7
1				+ 180		1	+360	+-
( (0.1	-1	(Column 2)	(Column 3)	ADDIT. F	EE L	]	ADD:T. FEE!	1
COLUMN CLASMS REMAININ AFTER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATI	ADDI- TIONAL FEE		RATE	ADDI TIONA FEÉ
Total 15	:Minus :	20	1:	1 1 2	 5 ;	t. Jos	×50	
" in all and it	Minus	3		×/0		JUR	1200	
FIRST PRESENTATION OF	MULTIPLE DEPE	NOENT CLAIR	: () ·	1	7		12/A	
		•		+/8		OR	7360 TOTAL	
				ADDIT, F	1	OR	ADDIT. FEE	
O REMARKY AFTER AMENOME	16	HUMECR PREVIOUSLY PAID FOR	PRESENT	RATI	ADUI- TIONAL FEE		FATE	/:: TIOIU FEE
Total • Independent •	Minus	••	= :	χô	5	OR	× 50	
Independent •	Minus	***		X /	· •	OR	1,200	
FIRST PRESENTATION O	F MULTIPLE DEPI	NDEIT CLAI	M 📗	J		1.	210	
	•	•		r 180		OR	1014	
· time entry in column 1 to test			ration 1			OR		